PEBATE MATE

Dear Parent / Guardian,

As you may know your child has been invited to join a debate club at school run by Debate Mate. The students have been invited to attend the launch of the programme **on Thursday 12th January at Blundell Park Stadium, DN35 7PY.**

The launch will run from **1 to 3pm** and we will therefore be leaving school at **12.40** and returning at **3.10**. We will be travelling by mini bus

This will be a great opportunity for the students to be introduced to debating, watch a show debate featuring world class debaters and students that have been involved in the Debate Mate programme before. Students also have the opportunity to take part in the floor debate in front of a large audience of their peers, if they wish. It will be incredibly valuable and a lot of fun!

All students must wear school uniforms on the day.

At some events and competitions, Debate Mate we will be taking photographs and /or videos. By signing the consent slip below, you are giving permission for group photos to be taken, which may be used for promotional purposes by Debate Mate.

Please complete the consent slip below showing that you give permission for your child to attend this trip. I will be bringing the students back to school with me once the event is over; however, if you are happy for your child to make their own way home, please also specify on the slip.

Thank you very much for your support.

Yours faithfully,

Mrs Emily McCullagh

Child's Name:

I give permission / do not give permission for my child to attend the trip **on Thursday 12th January at Blundell Park Stadium, DN35 7PY.**

I give permission / do not give permission for my child to make their own way home from **Blundell Park Stadium, DN35 7PY.**

Medical information

Please indicate any medical conditions that your child suffers from and any medication your child should take during off-site visits:

Signature of Parent / Guardian____ Media Contribution Release Form

CONTRIBUTOR (Student's Name):_____

SCHOOL:



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AGREED TO AND ACCEPTED BY:

Parent/Legal Guardian's name (printed):_____

Signed: _____

Date: _____